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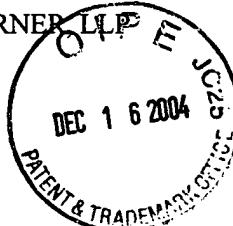
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22429 7590 09/24/2004

LOWE HAUPTMAN GILMAN AND BERNER LLP  
1700 DIAGONAL ROAD  
SUITE 300 /310  
ALEXANDRIA, VA 22314

12/17/2004 SFELEKE2 00000167 09901150

01 FC:1501 1400.00 0P  
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/901,150	07/10/2001	Masayuki Tomita	4468-020	5837

TITLE OF INVENTION: BIT ERROR MEASUREMENT APPARATUS AND METHOD, AND RECORDING MEDIUM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1330 <i>1400</i>	\$300	\$1630	12/27/2004
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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BAKER, STEPHEN M	2133	714-704000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lowe Hauptman Gilman  
2 & Berner, LLP  
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advantest Corporation

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 2

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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1337 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Kenneth M. Berner

Date 12/16/04

Typed or printed name Kenneth M. Berner

Registration No. 37,093

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